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<sup>2</sup> Admitted in Ohio and Indiana  
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Date: August 26, 2009

To: Examiner E. Colon-Santana GAU 2837 U.S. Patent and Trademark Office

Fax: 571-273-8300

From: William J. Clemens

Re: 17308

We are transmitting a total of 10 pages (including cover sheet).  
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COMMENTS: Please see the following Fee Transmittal form, Terminal Disclaimer and Response for filing in the patent application S/N ~~11/598,587~~. Thank you.

**10/598587.****CONFIDENTIALITY NOTICE**

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AUG 26 2009

PTO/SB/17 (10-08)

Approved for use through 06/30/2010. OMB 0851-0032

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Effective on 12/08/2004,  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4010).

# FEE TRANSMITTAL

## For FY 2009

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 140.00

## Complete If Known

Application Number	10/598,587
Filing Date	September 5, 2006
First Named Inventor	Richter
Examiner Name	E. Colon-Santana
Art Unit	2837
Attorney Docket No.	17308

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_  
☒ Deposit Account Deposit Account Number: 50-3156 Deposit Account Name: Fraser Clemens Martin &  
 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  
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## FEE CALCULATION

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	

## 2. EXCESS CLAIM FEES

## Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- 20 or HP =	x	=	
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HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
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- 3 or HP =	x	=	
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HP = highest number of independent claims paid for, if greater than 3.

Fee (\$)	Small Entity Fee (\$)
52	26
220	110
390	195
Multiple Dependent Claims	
Fee (\$)	Fee Paid (\$)

## 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
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- 100 =	/ 50 =	(round up to a whole number) x	=	
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## 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Statutory Disclaimer

Fees Paid (\$)

140

## SUBMITTED BY

Signature		Registration No. (Attorney/Agent) 26,855	Telephone 248-980-2100
Name (Print/Type)	William J. Clemens	Date August 26, 2009	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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